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DR. SHIPMAN'S CASES OF INJURY OF THE HEAD, WITH REMARKS.

[Concluded from page 361.]

CASE VI. *Fracture of the Right Parietal Bone—Fungus Cerebri—Death—No Operation.*—Mr. ———, æt. 20, was wounded on the head by the limb of a tree falling upon it. The scalp was torn up, and the right parietal bone fractured and comminuted. A doctor was called, who picked out several loose pieces of bone, and dressed the head with some kind of poultice. No symptoms of compression followed, and the senses were unaffected by the wound. He took physic several times, and stimulating drinks were freely given him from the first. He went on in this way about four weeks, when a tumor began to form over the wound. Various stimulating applications had been made to make the wound heal, as the doctor said, from the bottom. This tumor grew rapidly, and the patient soon became feverish and incoherent. A surgeon of skill was now called, who found an hernia cerebri protruding from a laceration in the dura mater. He also found that the scalp had not been laid down over the wound, but kept open to let the discharges pass off, as the attending doctor said it was hazardous to cover up such wounds, until they healed at the bottom! The surgeon last called advised the cutting away of the fungus cerebri, and applying compression; and, as the patient had fever, to employ counter-irritation, alteratives, &c. But he was over-ruled by the doctor in attendance, and the friends of the patient, who preferred to have him cured by the stimulating washes, poultices and salves, and the tonics and stimulants that he was using. The patient continued growing worse from day to day, and finally died about six weeks from the time of being wounded, much to the astonishment of the attending doctor. He was paralytic on the left side some time before death.

Autopsy, several hours after Death.—Body much emaciated. Hair on scalp had not been shaved, and was six inches long close to the edges of the wound, which had made attempts to heal over. The hair was matted and foul with the discharges from the wound. The fungus had shrunk within the opening since death, and the brain was collapsed around the opening in the skull, which was ragged and uneven, some points being depressed, while others were elevated above the scalp.

On removing the scalp, it was found that the fracture extended but a short distance from the place where the wound was inflicted. One loose spicula of bone was found driven into the substance of the brain, lacerating the dura mater, and from this spot the fungus cerebri took its rise. There were but slight vestiges of this tumor, but the brain was broken down and softened to the depth of two inches, and to the diameter of three inches. There was no great evidence of meningitis, or encephalitis, except near the point of injury. But the most striking change was the collapse of the brain, which did not fill the cranium by an inch on the upper and lateral portions.

Remarks.—For certain reasons I have not given names or dates in this case; but the facts I had from the surgeon who saw the patient during life, and the autopsy I conducted myself, and the appearances are correctly noted. We had here a common case of injury of the head, badly treated. The patient lived several weeks under the most absurd and outrageously unskilful treatment that can well be imagined. With a spicula of bone goading the brain and dura mater, the patient did not appear to be in a very desperate condition. There was no profound coma or violent delirium, and the paralysis did not occur until the hernia cerebri had come on, some weeks after the wound. This was caused, no doubt, by leaving the spicula of bone in the brain, and by the improper and unskilful manner of dressing the wound. It was one of those cases where the injury fell on a small portion of skull, unattended by general concussion as is the case where a large and heavy body strikes the head, or the patient falls from a height, when the injury is liable to take place at the base of the skull, or at a distance from the place where the blow was received. If the spicula of bone had been removed carefully, the scalp laid down, the hair shaved off, adhesive plaster and light dressings applied, and the dressings left undisturbed for fifteen days or more, the patient in the mean time being kept on low diet, and inflammation promptly met, as it supervened, it is probable that no hernia cerebri would have come up, nor the patient have died.

It is not often that the quack trespasses to any great extent on the domain of surgery. The disastrous termination of cases like the last mentioned, will be seen and appreciated by the most ignorant, as a general thing; but there are occasionally persons so thoroughly imbued with the spirit of opposition to everything pertaining to the regular profession, as to trust even a serious wound of the head to the care of these ignorant harpies. One case in point, which occurred in the State of New York some two years ago, will illustrate this kind of individuals. A healthy boy, aged about 14, was kicked by a horse. The blow wounded the scalp, fractured the skull, and depressed a small piece of bone. The father of the boy was one of those beings who are opposed to everything belonging to the regular and established order of things, in religion, politics and medicine. Instead of sending for a surgeon of skill, several of whom lived within a few miles of him, he took pains to send off a great distance for a Thomsonian. The doctor came, said the wound was of no kind of consequence, that he must be steamed, take lobelia and

cayenne, and be kept under stimulation to keep off cold. The poor boy endured all this for several days without any very alarming symptoms; but he finally succumbed to the treatment, and became feverish and slightly delirious. The steamer either getting tired of the case, or being obliged to leave, a surgeon was reluctantly sent for. He found a depressed piece of bone, and coma; and on trephining the boy, found coagula of blood beneath the bone. But inflammation had already set in, and in a few days the boy died. The father and the steamer now say that the surgeon killed him. It is strange, indeed, with what tenacity such men hold on to their prejudices. This same individual, a few years ago, had a brother, who had retention of urine, and he tried all manner of roots and herbs for three or four days, to no purpose; not a drop of urine could he get. Here was a quandary that he could not get out of. Finally I was sent for, introduced the catheter, and relieved the patient at once. The brother kept on with his steaming, and roots and herbs, the man had no further trouble, and he said that the steaming was what cured him, giving no credit to the catheter whatever. Such individuals are certainly incorrigible.

CASE VIII. Fracture of Skull—Symptoms of Compression—Operation of Trephining—Puncture of Dura Mater—Discharge of Serum—Recovery—Epileptic Convulsions.—On the 7th of August, 1846, I received a summons to visit a son of Mr. Joseph Prindle, of Spafford, Onondaga Co., N. Y., aged 27 years, who had fallen from a load of barley which he was carting in the field, on the banks of Skaneateles Lake, the day before. The horses and sleigh passed over him, and he was taken up insensible and carried to the house. Dr. Collins of Sempronius, and Drs. Babcock and Maxon of Scott, were called immediately to his assistance. It was decided by these gentlemen that an operation would be necessary. I was sent for the next day, and arrived there at 4, P. M., twenty-four hours from the injury. I found him in the following condition:—lying on the bed, in a heavy stupor; breathing slow, heavy and regular, with stertor occasionally. If he was touched about the head he would writhe, groan and mutter to himself, throwing his arms and legs in various directions; but on letting him alone, he would at once relapse into stupor. He had been bled once in the course of the night. His pulse was full, strong and regular, and the skin hot but bathed in perspiration. There was a wound on the forehead, a little to the right of the median line. This wound exposed a portion of bone, with a small capillary fissure traversing it. After consultation, it was agreed that some compressing cause existed within the cranium, and that the most likely place to find or reach it was to perforate the skull where the injury was inflicted. The mother of the young man was greatly opposed to the operation, so that we did not proceed to it until near dark. It was necessary to enlarge the wound in the scalp, by making an incision in the form of the letter V, when a portion of bone was exposed; a large sized trephine was applied, and a disc of bone removed, including the fissure through its centre. No blood was found beneath the bone, or anything which could give pressure. The piece of

bone being quite unequal in its thickness, the dura mater was perforated slightly at one point, through which a little serum escaped, especially when the patient struggled. As we found nothing so far that could account for the coma, it was suggested that the dura mater be punctured. For this purpose we retired a few minutes for consultation—there being five physicians present. Three were in favor of the operation, and two opposed. I was myself in favor of puncturing, and it was done carefully, with a sharp-pointed bistoury, after pinching it up with a delicate pair of forceps, to avoid wounding the brain. There was a profuse discharge of *serum*, tinged with blood, which continued to flow for some time, until we judged that a tea-cupful or more had passed away. When the patient moved or struggled, it gushed out with a jet. It was judged best to dress the head, which we did by laying down the scalp, and applying adhesive plasters, with a compress of linen, and a night cap over all. The patient, who struggled much during the incisions in the scalp, did not manifest any particular signs of being relieved of the pressure, except that he sat up on the side of the bed after the dressings were applied, but talked incoherently. He was placed in bed, with his head elevated, the room ordered to be darkened, a cathartic of calomel given, and a full bleeding directed next morning if the pulse should indicate it, or any signs of inflammation should come on.

I saw no more of this patient, as I lived several miles from him, but learned from one of the attending physicians, several weeks after, that he lay in a semi-stupid state for a few days, the bloody serum continually flowing from the head. Very little fever followed. Some delirium was also kept up for a few days, when it gradually went off, the wound healed entirely, and he recovered his health in a great measure. In October, three months after his injury, I learned that an epileptic convulsion suddenly seized him, but by appropriate remedies he recovered from the attack.

Remarks.—If this patient should remain well, and a permanent cure attend, it will be one of the most interesting cases on record. As it now stands, it is a remarkable one in several respects. The most inexplicable feature is the presence of such a quantity of serum in the cavity of the cranium. How did this take place? Was it there previous to the injury? or did it supervene after that event? It certainly appears quite contrary to our ordinary notions of pathology to find effusion, as the result of inflammation, in so short a period after an injury. Ordinarily we find inflammation commence about the third, fourth or fifth day after injury of the brain or its meninges, and effusion at a much later period. Could this have been present before the injury? This was suggested by one of the medical gentlemen present; but I am satisfied that this was not the case, because he was tolerably well up to the time of the accident, although he had complained of severe headache and some fever. It was also suggested that the bloody serum might be that which had separated from a coagulum of effused blood beneath the dura mater. But that was not probable. I believe it is not usual for blood effused into the living tissues, to separate in this manner; be-

sides, this kept up discharging from the opening in the dura mater for several days, indicating its source from the membranes. This case also proves that in some cases we may penetrate the cranium, and discharge serous fluids where they are known to exist, with some prospect of a final cure. On the whole, I think this effusion occurred within the twenty-two hours from the time of the accident to the period of the operation. Cases are related where blows on the testicle have been followed, in a very few days, by a large quantity of effused serum into the tunica vaginalis. From analogy, we may infer the same result in some cases from a blow on the head.*

CASE IX. *Injury of the Head from falling on the Ice—Epileptic Convulsions.*—A son of John Smith, of Homer, in this county, aged 17, fell on the ice in December last. His heels flew up, and he struck the back and upper part of the cranium on the ice with much force. The concussion was severe, and it was with great difficulty that he got into the house. He was delirious through the night, with a high fever. Dr. Bradford was called, who bled him, and gave him some appropriate medicines. In a few days he got about, but pain in the head, with bad nights, continued. I saw him, in consultation with Drs. Bradford, Browne and Green, of Homer, March 10th, 1847. He was in a stupid state, and had recently had epileptic convulsions. His nights, since the fall, had been restless, with troublesome dreams, and occasional fits of delirium. A semi-paralytic condition of the arm also existed, with rigidity of the muscles of the arms and trunk. His pulse was 110, tongue coated, appetite poor, bowels obstinately costive. Examination of the head detected a tender spot over the superior portion of the occipital bone, of the size of the palm of the hand. This spot, he said, was the seat of the blow, and had been tender and painful since. On making pressure with some considerable force, over the spot, and feeling the pulse at the same time, a marked irregularity was at once perceived. It would intermit and become unequal both in force and regularity. This was so striking a symptom, that it was noted by most of the medical gentlemen present, as a curious circumstance. His pupils were dilated more than natural, and he saw at times *muscæ volitantes*. The consultation was for determining the propriety of an operation for the relief of the symptoms, which had been suggested by one of the faculty. As no very efficient treatment had been put in force recently, it was resolved

* Mr. Prindle died December the 12th, four months after the injury. These sheets, with the exception of one of the cases, were written at Laporte, Indiana, and Mr. P.'s death was not known to me until since my return home. The particulars of his case I have been unable to obtain, but I understood that epileptic convulsions attended; and finally paralysis of the left side, coma and convulsions, closed the scene. It is to be regretted that no autopsy was made.

There was much speculation among the medical gentlemen, as above observed, on the subject of the effusion in this case, whether this was present before the accident, or was suddenly formed after that event. It is my opinion that the blow on the head was the cause of the effusion, by producing an action peculiar to itself in the secretory vessels of the meninges. Was this secretion the result of inflammation, thus suddenly set up in the part? Some cases have recently been reported in the American Journal of Medical Sciences, by H. H. Smith, M.D., and Samuel Jackson, M.D., formerly of Northumberland, where enormous quantities of effusion took place in the tunica vaginalis and pericardium in the space of a few hours. The case of Dr. Jackson, in particular, is analogous, where a sudden effusion came on, and was mistaken for strangulated hernia, and the operation was performed under that impression.

to shave the scalp over the tender spot, apply cups repeatedly, then ung. tart. ant., until a crop of pustules came out; at the same time an alterative course to be entered on, and pursued until some impression was made.

April 20th.—The patient began to improve at once under this treatment, and is now convalescent. If anything unusual occurs hereafter, I will report it.

CASE X. Injury of Head—Amaurosis—Epilepsy.—Chester Phillips, æt. 50, received a blow on the left side of the head five years ago. Severe concussion followed, with partial paralysis of the left arm, and amaurosis in right eye. The palsy of arm partially subsided in the course of two years, when he began to have epileptic convulsions. These have continued at intervals ever since. Six months ago, the left eye began to fail, and now the vision is so imperfect as to confine him to the house; muscæ volitantes, double objects, perverted images, flashes of light of various colors, distortion of all objects that he can imperfectly discern; as for instance, the sides of his room appearing like immense walls of gray stone work around him, and at times everything appearing covered with prismatic colors, varying and changing almost continually. The pupil of the right eye greatly dilated and immovable, the left contracted; his general health tolerably good; a sensation as if blood rushed to the brain. A careful examination could detect no tenderness of the scalp, or depression in the cranium, or any clue that would point out the precise seat of the injury. The blow which he received left no marks on the scalp to indicate its location. My treatment consisted in cupping the temples, and the insertion of a seton in back of the neck; active purgation, low diet, and the cold shower bath. Some little mitigation of the symptoms was the result; but not so striking as to warrant any long-continued course of medication, and I discontinued my visits.

Remarks.—This case is only valuable in showing us the long continuance and the obstinate and persistent character of a disease kindled up within the cranium by a blow on the head, without in all probability doing any injury to the bone. How long this case may go on in this way, without fatal organic lesion of the brain, remains yet to be seen. As to his recovering his eye sight, or his health, I think there is no probability of his doing so. One symptom that I omitted to mention, and one that confined him to his room most of the time for the last six months, was a rocking, undulating motion of everything around. When he went out into the street, or even about the house, the ground seemed moving around him like the waves of a rolling sea. This annoyed him greatly, and produced nausea and vomiting unless he kept perfectly still and quiet. The precise pathological condition of the brain, existing here, must be partially conjectured. Probably there exists some slow, insidious form of inflammation, that is gradually changing the tissues, and impairing the functions of the brain and nerve, and that will in the end prove fatal. (March 19, 1817.)

CASE XI.—Fracture of Cranium—Trephining—Recovery.—A son of Mr. Buel Kinne, æt. 9 years, was kicked by a horse on the 23d day

of May, 1847. The cork hit him on the left side of the os frontis, an inch above the superciliary ridge. He was picked up by his father, who saw the accident, and carried into the house in a state of insensibility. He vomited almost immediately on receipt of the blow. He remained in an insensible state for two hours, cold, pale, and countenance sunken. I saw him in four hours after the accident, in company with Drs. Ruddock and Lee. He had partially regained his senses, but was dull and torpid. Skin had become warm, and a re-action was coming on. On examination of wound, found scalp cut with cork, and a fracture of bone, with depression of a piece three fourths of an inch in depth. On enlarging the wound by an incision in the scalp, I found a piece of bone depressed the size of the cork, perhaps five-eighths of an inch in diameter. I endeavored to remove it with forceps, but its size—being larger than the opening in the skull—would not permit it. A trephine was then applied at once, and a piece of bone removed, which enabled the depressed portion to be taken away without fear of lacerating the dura mater. The piece depressed was the whole thickness of the cranium, the size of the cork, and twice the size from the inner table, which prevented its removal without the application of the trephine. As soon as the bone was removed and a small quantity of coagulated blood taken away from the surface of the dura mater, he came fully to his senses, and conversed rationally. The scalp was laid down and dressed with adhesive straps, and a night cap put on; his head was elevated, the room darkened, and a cathartic given.

From this time it is unnecessary to detail the progress of the case, as he recovered without an unpleasant symptom. No fever or headache followed. He was clamorous for food every day, and also wished to get out of doors to play. I let the dressings remain on for two weeks, and when I removed them healing was perfect throughout the wound.

Remarks.—This was a simple case of fracture, without disturbing the cerebral mass to any great extent, in consequence of the blow being of that description where the injury is confined to a small extent of skull. No general concussion or violent agitation of the brain can take place in this description of injury. You see at once the whole extent of it. The base of the brain is undisturbed, and the middle portions do not suffer. Hence this class of injuries are far less dangerous than others. The application of the trephine here was demanded by the symptoms of compression that were present, as well as for the prospective good in removing the loose piece of bone that would otherwise in all probability have caused disturbance at some future time.

CASE XII. Fracture of Cranium—Recovery, without Operation.—Miss S., æt. 19, was thrown from a carriage, by the running away of a horse, June 25, 1847. She struck on the curb-stone, and a wound was made by the corner of a post, above the right superciliary ridge. Another lady in the carriage was thrown out also, and severely bruised on her back and limbs. Miss S. was taken up entirely insensible, and carried into a public house near by. I saw her in about an hour after the accident, and found her in a stupid condition. She had vomited a short

time before my arrival. On examination of the head, I found a wound of the scalp over the frontal bone, on the left side. It was small, but extended to the bone. I enlarged it a trifle to examine the bone more perfectly. A fracture was distinctly visible, with slight depression of one side. She was cold, and the pulse small and weak. In a short time, however, she became warmer, and the pulse more full. This was near evening. In the course of the night re-action came on, and venesection to sixteen ounces was performed. She has regained her senses in a great measure, but there is numbness of the left arm, and inability to articulate distinctly—also headache, flushed face, and the right eye closed by ecchymosis.

June 27th.—Fever; pulse strong, full and hard; left arm very numb, with an inability of using it. Venesection to twelve ounces, with relief. Cathartic of calomel, and comp. ext. colocynth. Cold to head, which is elevated, and the room darkened.

28th.—Headache and fever continue. Gave calomel as a cathartic, and continue cold to head.

It is unnecessary to continue the daily report of this case. The fever gradually subsided in a week's time, the arm regained its natural sensation and motion. The ecchymosis went off from the eye, and I dressed the scalp in ten days from the accident, when it was perfectly healed.

Remarks.—This girl was strong, robust and plethoric. The injury produced severe concussion, and there was probably some slight effusion, either beneath the part injured or more deeply seated. No inflammation followed, and she recovered perfectly, and has been quite well ever since. If there was effusion of blood, it was absorbed most probably, and that, too, in a very short time.

Cortlandville, N. Y., April 27, 1848.

TYPHUS AND DYSPEPSIA.

[Communicated for the Boston Medical and Surgical Journal.]

It was the observation of one of the best physicians which New England ever produced, that "he who could treat a typhus fever well, could treat any disease." This was the shrewd remark of a close observer of nature; and it is true that typhus is associated, in its various victims, with all that varied condition into which the human system may fall, whether it be that which is brought on by any of the diversified forms of intemperance, or any other derangement, not caused by sins against *bonos mores*, but by sins against the laws of hygiene—laws which may easily be shown to be as little understood as the laws of the Lunarians, although much prated about by sciolists both within and without the profession. With such varied complications, it was well said that he who could treat typhus well, could treat any disease well. The individual alluded to doubtless did not mean that he who could, by placeboes and pretence, by seeming to treat when he was doing nothing, who could best succeed in hood-winking his patient and his friends, could treat any

disease well ; for that would be a mockery. But he meant that whoever could unravel the complications of typhus, and treat the patient, as one may say, on its own merits, might also unravel and treat, on its own merits, every other disease to which man is liable ; and surely that will be acknowledged to be true, by considering that the gravamen of all other diseases depends on this complication. Is the complication that which bears the name of dyspepsia ? This comes in typhus, and is one of its most severe complications, and is one that oftenest renders the disease fatal. How large a portion of those who die, labor under some form of this complaint ; and in extreme cases how hopeless of a favorable result is typhus, when it attacks such victims—and to treat it, you must resort to some course more efficient than a change of air, diet and exercise—a treatment, which never cures except by mistake, or more properly, inadvertently, and this without the procuring of the medical adviser, and often without his knowledge. When this state of things comes, then, with typhus, or rather when typhus comes upon this state of things, the ordinary palliatives are out of the question, and the dyspeptic condition ought and must be treated—as in every case of pure dyspepsia it should be treated, if we would not have the victim of it go mourning all his days, his life embittered with ill health. This was the type of dyspepsia, and this is its history—and to relieve it in its simple state, or in the complicated one of typhus, requires more knowledge and skill than the profession now generally possess. * * * * *

WOODBIDGE STRONG, M.D.

INVOLUNTARY NOCTURNAL EMISSIONS IN A MARRIED MAN.

[Communicated for the Boston Medical and Surgical Journal.]

THE following case was rather interesting to me, and owing to its *rarity* I thought it might not be uninteresting to some of your numerous readers.

Mrs. S. came to my office a few weeks since, to consult me in regard to the health of her husband. After a fair show of modesty, and a good deal of side-wise talk, she told me that her husband had been subject to involuntary nocturnal emissions ; that his health, of late, had become quite poor. She says that he is getting to be irritable and dejected. Much of the time he cannot work ; thinks he shall soon be obliged to go to the almshouse, if not to the insane hospital. After making all the inquiries which delicacy would allow, I prescribed for him a vegetable diet, light suppers, a cold bath at night ; to take a small blue pill every third night, to be followed in the morning with sulph. magnesia, also tinct. lytta, thirty drops three times per diem.

In about ten days I heard by Mrs. S. that my patient was decidedly better ; the “drops had had a wonderful effect.” I told Mrs. S. that her husband must not think of a perfect cure unless he was willing to consult me personally, and thus enable me to make further inquiries into the case. In the course of a few days my patient called to see me.

He is a moral, and, in many respects, an intelligent man. Has been married about ten years; has one child, 2 years old. Was never troubled with seminal weakness until within two years. At that time he came to the conclusion that sexual intercourse was decidedly injurious to his health, and must be entirely abstained from, at least for the present. Whether my patient came to this sage conclusion by reading the writings of Graham, Alcott, or some other misanthrope who would deprive mankind of half the luxuries and many of the pleasures of life, I do not know; at any rate, his mind was made up, and neither the promptings of nature, nor the solicitations of a virtuous and lovely wife, could dissuade him from his purpose. I had but little difficulty in making my patient understand the nature and cause of his present troubles, and of proposing to him a plan of treatment which I think will be highly beneficial and equally satisfactory to himself and his anxious partner. All the fear I have now is, that the remedy will be repeated oftener than I suggested. Let me say, in conclusion, that Mrs. S. called at my office yesterday, appeared cheerful and happy, and had nothing to say about the health of her husband.

J. D. MANSFIELD.

South Reading, May 25th, 1848.

SANITARY RETREAT IN FLORIDA.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Founded upon the impressions of truth and sentiment, we consider it far better for us to be employed in maintaining the localities of our country, and developing its resources, than to be branded as a sycophant slave, to an argument of the most ridiculous and presumptive nonsense. In reply to the absurdities of the anonymous gentleman, who has thought proper to cross our path, we shall not respectfully confine ourselves to narrowed limits, as regards his honorable self—though he may be as “eminent” as Humboldt, and as hoary as the venerable patriarch of the tribes. When men attempt to fan the flame of local prejudice, and hide themselves under the masked friendship of personal motives, to sustain their partial views, we do not think them entitled to any respect. It seems, by the drift of the gentleman’s language, that his great and most potent self has decided that Cuba is the most favorable and salubrious climate for our invalids—superadding every comfort for their welfare, and offering facilities in access, accommodation and cheapness, suitable to the exigencies of all. Now, Mr. Editor, we cannot blame a hired satellite, or purveyor, for obeying the injunctions of his master, and acting for his interest; allowing the principles which guide him, are not seducingly corrupt. But in this case, we have the most unwarrantable abuse of every honorable intention; as it is well known to all that there is not a more expensive place in the universe, than Cuba, for no suitable accommodations for the invalid can be obtained for less than from \$2,50 to \$3,00 per day, and those accommodations not without some objections.

We have no doubt of our friend being a pure philanthropist, as is shown by those beautiful and humane remarks, in the caricature of the "fifty miserable consumptives, who crawled out to sun themselves at St. Augustine." In inanimate nature, Mr. Editor, there is another kind of animal, that "crawls out to sun itself," and although unlike the poor unfortunates referred to, it can be strictly compared with this illustrious hero of Cervantes, who has aimed such a supposed death-blow at our "project."

In the annexation of Cuba, and the "star and stripe" idea, our philosopher seems to operate in a very limited sphere of Americanizing the "Island," by seducing invalids to its "expensive and luxurious establishments." His intellectual stamina is represented on a broad scale, when he directs his artillery of abuse against the southern portions of our country, and their institutions, to satisfy the cravings of a morbid appetite of the fanatical few. We should have advised him to better policy in his local sentiments, if he wished to be successful in supplying his friendly landlords with customers. As certainly he must be extremely ignorant of the place which he is advocating, if he is not aware, that more than two thirds of the Americans that visit Cuba are from the South, or what is termed the "slave-holding States." Florida—"its slavery"! this is too rich; for if our hero, in the application of this term, intended to secure a little more sympathy in behalf of his favorite scheme, it seems to be just about as inconsistent as the taking of the Moro-castle, with a corporal and ten men; as every one knows that the mild treatment of the slave, in our southern country, is not to be compared with his abusive and rigid treatment, and the accursed slave traffic, in the Isle of Cuba. This attempt to prejudice the minds of the people in his favor, seems to be a total failure; and we would advise him to hunt up some other tirade, wherein his brain would not be seen beating a retreat, from practical sense and sound reasoning.

Again, our caterer does not seem to have even satisfied the American residents of Cuba, in his superfluous and momentary effulgence of sentiment, when the invalid is heard to declare, "that he met with more advocates in Cuba, for a sanitary retreat in Florida, than in any other place which he visited." The high-minded and well-educated Spanish gentleman, is endowed with too much good sense to tolerate and foster a traitor in the bosom of his country. Therefore, by an expressed feeling, of that which is natural, our friend's position will be rather untenable, if he designs any future visits to the great island. And when this devoted loyalist is expatriated from his favorite haunt, we will receive his "eminent" self into our sanitary retreat in Florida, where we will feed him on the "milk" of human kindness; with occasional doses of the more delicious beverage, the "milk of cows," which is more applicable as a nutritive support for such juveniles.

"The meanness and penuriousness of the southern hotels, the villainous climate of Charleston," are familiar terms with this writer, to say nothing about the "want of covered carriages," which our delicate and aristocratic personage has attached to his leading strings of imputation. There are men, Mr. Editor, who will advocate anything, as a

matter of local interest ; and is there a greater profanation to the sacred name of benevolence, than when we seek to invest ourselves with its heavenly mantle, as a cloak to our purely selfish purposes. Would not common sense dictate to us the utter impracticability of Cuba becoming a resort for our invalids. Aside from every other objection to this place, the very idea of the enormous expense to be incurred, comparatively with that of Florida, would be a hindrance to at least seven eighths of those who would wish to enjoy the benefit of a mild winter climate. The gentleman has presented us with a very anomalous case of " Prof. C.'s widow, of West Point," accommodating boarders for \$7,00 per week. If such a house exists in the Island, we would ask of those who are intimately acquainted with Cuba, what kind of accommodations and fare could be afforded for such a limited price. This seems to be consonant with the views of our erudite friend on the impracticability of easy access to Florida ; which is too ridiculous to refute, as no one can be so ignorant of the internal navigation of his own country, as not to know that there is direct communication by steam.

The most remarkable demonstration of our classical genius, is his melancholy quotations of Latin, from grave-stones ; and something about a great man of the Commonwealth. We are willing to pay a tribute of respect to the illustrious dead—but we are not always willing to see their memory profaned, by a self-righteous Pharisee, who advocates scenes of dissipation as a diversion and moral attraction for invalids.

Now for the most melancholy part of the whole matter. It is in reference to the poor " young man, who went down to Florida for his health, was benefited, returned home and made his maiden efforts at the press" in vindication of the climate of his country. For this sacrilege, our virgin hero was "objurgated," cursed, and sent to the valley of darkness, as an awful and exemplary punishment for his horrid crime. What a walking spectre he must be, if he yet survives, shrouded in darkness, and doomed to wander among the self-righteous with such a stain of sin upon him, that all the "milk" in Florida could not purify nor wash it out.

If we understand our friend right, the attractions of Cuba are, its theatres, its pretty women and unique men, the Roman churches, narrow streets, beautiful saloons, and national amusements in general, excluding the vulgar idea of cock-fighting. We shall not introduce any objections to these attractions, which seem to be particularly suited to the taste of our friend ; as a matter of sympathy, he should be indulged with his "milk," wherever he can find it.

The very philosophical remarks on climate and adverse latitudes, appear to be another favorite theme of our writer. We shall pay no more attention to his old exploded doctrines, than to say that however divided the medical profession may be in the selection of a suitable winter retreat for consumptives, the highest authority of our country, from personal experience, has fully proved the superior effects of a climate which requires woollen clothing, to the pernicious atmosphere and debili-

tating heats of Cuba, that hasten decay by the softening of developed tubercles, and predispose to hemorrhage.

The most amusing part of our friend's soliloquy, is the placid and self-conceited satisfaction that he seems to enjoy, at having crushed and withered all our hopes, by his immortal and learned production. He will have reason to be convinced to the contrary of this, before we are done with his precious self; as there are more voices than one to speak on this subject, before it is perfectly "cicatrized." Then we are informed, by our historian, that the "project of a house for invalids in Florida, has been broached for twenty years." This speaks well for the climate. But further, "Our good citizens know better than to pay their money for such purposes." Ah! there is the rub; and a very moderate genius could penetrate the design, in striking at what he thinks to be the main root, and support his selfish locality, by accumulating hostility to the enterprise from the ranks of those who may have been solicited to aid in a pecuniary point of view. As this will not have the intended effect, we would advise our friend to shift on another tack, and see if he could not fetch a more eligible point in support of his favorite hypothesis; always bearing in mind, that the more you persecute a good cause, the more you aid it.

As regards the idea of the thirty or forty chronic cases, in such a hotel, with their favorite Drs. A. and B. abroad, it is all hydrogen gas, in our estimation; as a good supply of "milk and covered carriages" will quiet all the fastidious cravings of those who are disposed to find fault.

We have just received a letter from C. N. Brush, Esq., of Palatka, stating that he "is daily receiving letters from various persons abroad, with anxious inquiries to know when the house will be completed for their accommodation." We will inform those who may be misled by such unprincipled perversion of the truth, as was lately published in the *Journal*, by an unknown writer, that such a house as we are advocating will pay well, with superior accommodations to the first hotels in Cuba, and at half price for board. And every candid mind can judge of the feasibility of the plan, and of the preference of a rural retreat in our own country, with its carriages, boats, music, and good table, to the risk and expense of a visit to Cuba, where so many have breathed their last.

Our friend has now had our opinion for what it is "worth." And if he is the oracle which speaks the sentiment of the medical profession in Boston, we cannot expect from them much reciprocity of feeling in the enterprise in which we are engaged for the benefit of *northern invalids*.

Portland, May 24th, 1848.

AUGUSTUS MITCHELL, M.D.

SURGICAL CASES TREATED BY MAYNARD'S ADHESIVE SOLUTION.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In a former article, I stated my intention, of detailing, as leisure served, a limited number, from a numerous collection, of cases in which

the advantages of my new method of dressing wounds had been amply demonstrated. In continuation of those contained in my first report of cases in your Journal of April 19th, I transmit the following, which occurred some four or five months after my original application of the new agent to surgery.

Omitting many intervening cases of secondary importance, I will select, as the third one worthy of record, an operation performed by Dr. Whitney, June 1, 1847, for the removal of a tumor of the dermoid texture, situated near the right trochanter major. It was of the species described by Warren as the keloides of Alibert, and the subject of it a female, *æt.* 56. About two years since, a product similar to this had been removed from her right shoulder; some three or four months subsequent to the removal of which, this latter was for the first time noticed.

In its general appearance it resembles very closely the cicatrix of a burn. Its surface is slightly red and elevated above the surrounding skin. Numerous vascular processes may also be seen shooting out from it in different directions. It manifests no particular tendency towards ulceration; still it is somewhat sensitive to the touch, and sharp pains occasionally lancinate through it.

Dr. Whitney performed the operation by embracing the tumor within two elliptical incisions, extending sufficiently far into the sound skin to ensure its entire removal from the subjacent tissues. The bleeding having been arrested, it was dressed with the "adhesive solution," in the following manner. The edges of the wound being placed in exact contact, I applied the solution with a hair pencil to the surface of the skin, commencing at one extremity of the wound. This in a few seconds becoming thoroughly dry and adherent, I continued the application the whole length of the incision, the lips of the wound being sustained during this time in their proper position by manual aid; when after applying several coatings to ensure permanent contact, the patient was placed in bed without any further application, directions being left to apply freely cold lotions to the part, without fear of interfering with the adhesion of the dressing.

On visiting the patient on the succeeding day, the "solution" was found to have admirably answered the purpose, the patient not having experienced the slightest inconvenience. Feeling herself perfectly well, she expressed a desire to be allowed to go out. This was assented to, but as locomotion would cause considerable contraction of the muscular fibres in the neighborhood of the incision, it was thought advisable to still further strengthen the support of the integuments by narrow strips of tape, which were attached by the "adhesive solution" on both sides of the incision, which dressing was found on the fifth day to be perfectly adherent, unirritating to the skin, and unaffected by repeated ablutions—qualities not possessed by any other known method of dressing.

The fourth case which I will mention affords an exceedingly novel application of the new "adhesive solution," and its superiority in the treatment of similar cases.

Mr. H., aged 33, was attacked, June 6, 1847, with a violent inflamma-

tion of the right testis. Its increased size and weight, which had caused an exceedingly painful dragging sensation along the cord, had already suggested to the patient the idea of supporting the testicle by means of a temporary suspensory bag. This, however, did not exempt him from maintaining a recumbent position and perfect rest, as every movement of the body or limbs caused extreme suffering. From the well-known benefits of equal compression in such cases, it was suggested that the "cotton solution" should be applied so as to form a solid encasement over the whole scrotum. This was effected in the following manner:—The hair having been previously removed, a thin layer of the "solution" was painted over the parts by means of a hair pencil. Its first application was followed by some pain, owing to the morbid sensitiveness of the parts. The rapid evaporation of the ether by which the gum is held in solution, soon left the whole organ encased in a layer of transparent tissue firmly adherent to the skin, and by its contractile properties reducing the size of the enlarged testicle fully one third.

In two other cases of orchitis the mode of application has been varied in the following manner. A sufficient number of strips of cotton cloth being prepared, from half an inch to an inch in width, the end of one of the strips is thoroughly moistened and immediately attached to the perineum; the solution becomes dry in a few seconds, and the testicle is then snugly compressed by gradual tension. The other extremity of the strip being moistened in the solution, is attached to the abdomen an inch or more above the pubis. This process should be repeated until the whole scrotum is completely encircled.

Complete support to the testicle is thus obtained, which gives great relief to the patient, and tends to promote rapid absorption.

Dedham, May 3, 1848.

JNO. PARKER MAYNARD.

[To be continued.]

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. JUNE 7, 1848.

State Medical Society.—A bright morning sun, on Wednesday last, gave promise of a pleasant meeting, which was fully realized. Having gone through the regular business of district election of Counsellors, which generally excites much less interest than it should, some minor matters were brought before the meeting, and at 1 o'clock Luther V. Bell, M.D., delivered a discourse on *ventilation*, which embraced a series of facts and philosophical suggestions, of the greatest importance in regard to public health. It is to be regretted that the Legislature of Massachusetts could not have had the benefit of this excellent and learned lecture, at the time they rejected a very modest effort of some of the representatives to give the General Court the advantages of a pure atmosphere, while they were last in session.

Nearly four hundred medical gentlemen dined together at a spacious hall on Hudson street, instead of Faneuil Hall, as previously announced. The entertainment was elegant, and satisfactory, we believe, to all present. The following is a list of the Counsellors chosen :—

- Essex South*.—Drs. A. L. Peirson, Geo. Choate, A. Story, J. Lamson.
Essex North.—R. Longley, R. S. Spofford, R. Herbert.
Worcester County.—S. Batchelder, E. Flint, C. W. Wilder, P. T. Kendall, Benj. Pond, J. Green, B. F. Heywood, J. G. Metcalf, J. Stone, T. R. Boutelle, C. C. Field.
Berkshire Co..—R. Fuller, A. G. Welch, H. H. Childs, S. Jennings.
Hampshire Co..—E. G. Upland, D. Thompson, A. S. Peck, C. A. Hall.
Southern District Society.—W. C. Whitridge, Samuel Sawyer, F. Hooper, A. Mackie, J. Haskell.
Barnstable Co. District Society.—A. Cornish, A. Poole, S. H. Gould, J. Leonard, Jr.
Hampden District Society.—J. W. Rice, C. Bell, N. Adams, T. Chapman.
Middlesex District Society.—J. C. Dalton, N. Cutter, G. Kimball, A. B. Bancroft, E. Huntington, H. Pillsbury, J. W. Graves, J. Bartlett.
Franklin Co..—S. W. Williams, J. Deane, Geo. W. Hamilton.
Middlesex Co..—T. Wellington, J. Ware, M. Wyman, J. S. Hurd, Z. Howe, A. Hooker, J. M. Whittemore, C. F. Chaplin, B. Cutter, J. W. Bemis, L. V. Bell, H. Adams.
Norfolk Co..—J. Stimson, E. Alden, E. Stone, E. Jarvis, A. Howe, J. Ware, H. Bartlett, E. Woodward.
Nantucket.—E. P. Fearing.
Plymouth Co..—E. Thaxter, P. L. Nichols, W. Warren.
Bristol Co..—C. Swan, J. Gardner.
Suffolk Co..—G. C. Shattuck, E. Buck, J. Homans, Z. B. Adams, J. Jeffries, W. Lewis, J. Flint, S. Morrill, J. D. Fisher, A. A. Watson, Geo. Bartlett, Dr. Harwood, M. Gay, C. H. Siedman, J. Bigelow, G. Hayward, S. D. Townsend, J. V. C. Smith, G. W. Otis, J. C. Hayden, D. H. Storer, A. Thomas, C. G. Putnam, M. S. Perry, A. Palmer, A. A. Gould, J. B. S. Jackson.

On Thursday the council proceeded to the election of officers for the ensuing year. Dr. Howe, of Billerica, the President, declined being a candidate for re-election, and also Dr. Batchelder, the Vice President. On the first ballot, Dr. John Ware, of Boston, was elected President, and Dr. Joseph Stone, of Harwich, Vice President. Other appointments of executive officers will probably be announced soon in the published transactions. Dr. Bartlett, of Concord, is the orator for 1849. Last year the income to the treasury was \$1351.87; and the outgoes, \$1038. About \$200 are now on hand. The permanent fund of the Society, securely invested, in January next will amount to \$11,000. There was some incidental business, which we intend to record another week, not having room for a more extended report to-day—beyond remarking that the Massachusetts Medical Society never exhibited more vigor, enterprise, and soundness of constitution, than at the present moment.

New Jersey Lunatic Asylum.—An elegant edifice has been completed at Trenton, for the reception of the lunatics of New Jersey, which is honorable to the humanity, taste and intelligence of the people of that State. H. A. Buttolph, M.D., the medical superintendent, has issued a circular, comprising the by-laws of the institution, so that the public may have exact and correct views of the intentions of the managers in regard to the administration of the Asylum. Private patients are admitted on certain conditions; indigent persons may be supported at the expense of counties; pauper lunatics are admitted by order of the Judge of the Court of Common Pleas; and criminal patients, or those acquitted of criminal charges on the ground of insanity, are received under certain provisions of law. In short, from the present indications, the Asylum will soon have a rank among the most distinguished hospitals for the insane in our country.

New York Academy of Medicine.—The catalogue of members, just published, shows that the Academy embraces the strongest and most worthy men of the profession, in the city of New York. The constitution guards the institution thoroughly against the inroads of pretenders, and holds out the rewards of honor to those who are admitted within its enclosure. John W. Francis, M.D., is President—a man whose name is familiar to those who have kept pace with medical literature in America. There are five standing committees, to whom is referred the various subjects brought before the Academy, and thus perfect order and efficiency are secured, and the science of medicine is promoted, at the same time that friendship and courtesy between those devoted to the arduous and responsible pursuits of professional life, are sedulously cultivated.

Defence of Dr. Jackson's Claims to the Discovery of Etherization.—Messrs. Joseph L. Lord and Henry C. Lord, attorneys at law, in Boston, have published a pamphlet of thirty-seven large octavo pages, in which an amount of testimony is collected to prove Dr. Jackson's unequivocal claims to the honor of having made the great discovery of the age, which must exceedingly perplex those who have heretofore considered the question settled in another way. The Punic wars were not more energetically prosecuted than the ether controversy thus far, and the latter bids fair to run through as many years as the former. It will be gratifying when a final decision is made by some tribunal acknowledged by both parties to be competent, and an impartial public enabled to decide upon whose brow the wreath of honor shall be placed. Each claimant has thus far had his advocates, and pamphlets have followed each other with a rapidity that has kept the fact in remembrance, that the inhalation of ether was discovered and is now in universal use.

Chemistry of Food.—A small but instructive treatise, embracing the researches of the celebrated Prof. Liebig, on the chemistry of the food, and the motions of the animal juices in the body, has been published at Lowell by Bixby & Co. In order to give the work all the advantages of a good introduction into the English language, it was edited from the author's manuscript, by Dr. Gregory, Professor of Chemistry in the University of Edinburgh, and finally edited, from the English edition, by Professor Horsford, of Cambridge University. The book is a duodecimo, neatly printed, containing about two hundred and fifty pages. Sec. I. is devoted to the methods of investigation in animal chemistry. II. The constituents of the juices of flesh. III. Practical results of the investigation.

By this treatise certain facts are established in regard to the value of various articles of food—as it is shown that one kind of cooking destroys the nutritious qualities, while another preserves them—and hence practical lessons of importance to the community may be learned from it. For example, boiled meats, if eaten without the soup, afford but little nourishment. This is a famous country for boiled dishes, especially in the rural districts of New England. The pot-luck of the farmers entirely excludes the liquor in which the meats and vegetables have been cooked. The theory of roasting; the best plan for making soups, portable or otherwise; extracts of meats for wounded persons; the character of brines; the effects of salt on meats, &c. &c., follow, with a philosophical exactness of detail, which makes the matter clear that good cooking is truly economical.

This country, as well as Europe, abounds in dietetic teachers, who have made themselves prominent by their efforts to change the habits of living in individuals, and through their example, in whole communities. But such changes have invariably been attended with extreme difficulty, so fixed by custom and opinionated are most people in respect to what they conceive to be for their health in eating and drinking. Prof. Liebig proposes no changes, nor does he in a single instance quarrel with the customs of society. As a chemist, he simply presents the results of certain researches, and leaves the application to the good sense of the world.

Gentlemen who are interested in chemical studies, will enjoy the first and second sections particularly, because the author exhibits there the higher powers of his intellect. There is a deep research and technical character running through those parts of the book, which accords with the dignity of the subject, but which is wisely laid aside when he descends to the level of ordinary readers in the third and last section. Whatever has been added by the two editors, will be appreciated by those who understand the nature of their labors.

Canchalagua.—A bottle of the extract of this much-spoken-of plant, having been presented us by Messrs. Brewers, Stevens & Cushing, large importing druggists of Boston, we have been induced to look more critically into the history of its introduction into notice, and its claims as a new and valuable medicine. It grows not only in California, but in various sections of Mexico, and is said to be extensively used there by the inhabitants, as a tonic. Very little confidence is placed in the accounts of its efficacy in fevers. Letter writers harp upon its excellent medicinal properties, by saying that it is superior to sarsaparilla. If it is not, then we are quite certain it is not good for much, since the fact is pretty generally conceded that sarsaparilla possesses no great efficacy, notwithstanding the hue and cry through the length and breadth of the land, in proclaiming its sovereign potency. Too much virtue is claimed for canchalagua, which induces us to distrust the accounts from abroad. Thus consumption, cough, influenza, asthma, bronchitis, scrofula, gout, &c. &c., through the quack's entire catalogue of physical woes, for which he has the never-failing panacea, are all swept away before the irresistible energy of canchalagua. Before physicians take it into their patronage, something more is necessary to be known on the subject. It appears to be a mild stimulant, but that it possesses any advantages over a host of medicines with which the profession is familiar, is not yet satisfactorily proved.

Homœopathy in Russia.—"A homœopathic hospital was formally opened in Moscow, in the presence of the Governor-general, Prince Setscherbatoff, and other persons of rank and influence. It is supported by voluntary subscriptions. Dr. Schweikert was appointed honorary medical officer." Such hospitals have in former years been opened in various parts of Europe, but we are not informed of the success which has attended them. We are frequently told that the people are weary of homœopathy, and that the whole system will soon be out of fashion; but the practitioners seem to be constantly increasing, and their patients appear perfectly fascinated with the do-nothing method of treating their maladies. On the whole, it may

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be considered a costly amusement for whiling away dull hours, from the circumstance that great bills are apt to follow in its train, but which are doubtless paid with cheerfulness.

Controversy respecting Sanitary Retreats.—Readers will notice an article in this day's Journal, from Dr. Mitchell, of Portland, Me., in answer to a paper which was given a few weeks since by one of our best writers, and a most highly-esteemed medical gentleman. That article, we thought, was perfectly courteous towards Dr. M., although we regretted that the writer found it necessary, in reasoning from facts and his own observation, even distantly to allude to matters which have so often produced contention between those residing in different portions of our country. Dr. M., of course, was entitled to a reply—but it is not of a character which we like to publish in the Journal, or such an one as we think the paper of our correspondent was entitled to receive; nor are the arguments and style worthy of the enterprise in which Dr. M. is engaged. We say this not in anger, but because it is self-evident that a controversy conducted in this manner might be continued interminably, and no one be made the wiser or better for it. A communication on the same subject has also been received from Schenectady, N. Y. Owing to the badness of the paper on which it is written, it is impossible to decypher the whole of it; but it is apparently in the same style, but anonymous, and we must decline inserting it in the Journal. The writer says that extracts from Dr. Wurdeman's letters will hereafter be sent us; these, or any facts, or candid deductions from facts, from himself or others, on this important topic, will be gladly received,

National Medical Association.—An abstract of the proceedings of the Association at Baltimore, last month, is given in the Philadelphia Medical News. We find but little of interest in it, besides what has already appeared in this Journal. The following is the committee of arrangements for the next meeting in Boston:—Drs. Jacob Bigelow, E. Hale, Z. B. Adams, J. C. Dalton, John Ware, O. W. Holmes, H. I. Bowditch.

TO CORRESPONDENTS.—The following papers have been received, and will have early attention given to them. On Epidemic Influenza, by Dr. Leonard; Illustrations of Chronic Rheumatism, by Dr. North; Anchylosis of the Jaw, by Dr. Castle; Dislocation of a Cervical Vertebra, by Dr. Hill; Massachusetts Medical Society, by Dr. Scamell. Reference to a paper by "Medicus" will be found in another paragraph on this page.

MARRIED.—In Boston, Luther Parks, Jr., M.D., to Miss J. Dale.—L. E. Marsh, M.D., of New Salem, to Miss S. Gibbs.—In Uxbridge, Truman Rickard, M.D., of Woburn, to Miss Elizabeth Read Capron, of Uxbridge.

DIED.—At Flushing, Long Island, N. Y., Dr. James Malcolm Smith, of the U. S. Navy, a native of Turk's Island.—At Northampton, Mass., Dr. Charles L. Seeger, a native of Germany, 86. He had been a contributor to this Journal in former years.

Report of Deaths in Boston—for the week ending June 3d, 53.—Males, 22—females, 31.—Stillborn, 3. Of consumption, 8—typhus fever, 6—lung fever, 2—scarlet fever, 2—brain fever, 1—convulsions, 3—infantile, 6—croup, 3—child-bed, 2—diarrhoea, 1—inflammation of the bowels, 2—dysentery, 1—disease of the bowels, 1—disease of the heart, 1—dropsy, 1—dropsy of the brain, 5—hooping cough, 2—paralysis, 2—bronchitis, 1—murdered, 1—cholera infantum, 2—old age, 1. Under 5 years, 25—between 5 and 20 years, 5—between 20 and 40 years, 10—between 40 and 60 years, 11—over 60 years, 2.

Medical Miscellany—Each bottle of the Shaker Sarsaparilla contains one ounce of pure hydriodate of potash, says a correspondent—A large number of cases of small-pox, were brought by emigrant vessels into New York, last week.—M. Buchez, President, and the Vice President of the National Assembly of France, are M.D.'s, and thirty-six of the representatives are physicians. The profession is beginning to act in high political spheres.—The building lately called Hôpital Louis Philippe, and now Hôpital de la République, is nearly completed. Five hundred workmen are daily employed on the structure.—There is at Munich an extensive establishment for the preparation of a peculiar kind of castor oil, now in great request, especially in Italy. With syrup of orange peel, and orange-flower water, it is readily borne by all patients, and it is efficient in much smaller doses than the usual oil—viz. from one drachm and a half to three drachms. Buchner has found it in seventy-two parts of oil to twenty-eight of alcohol and water. As alcohol dissolves the really purgative principle of the castor oil, the superior efficacy of this oil is readily explained.—Dr Bartlett's work on Fevers is severely handled in the last New Orleans Medical Journal.

AYER'S CHERRY PECTORAL.

AN Anodyne Expectorant, prepared on the new plan of combining the isolated, active principles of medicine, in their purity; a plan which is found to give an energy and certainty of remedial effect far surpassing any other in use. The substances of which it is composed are those known to be most relied on for the relief of pulmonary disease, viz.: Morphine, Sanguinaria, Emetine, Tart. Ox. Antim. et Pot., Hydrocyanic Acid, Saccharum, Spt. and Aqua; combined so as perfectly to resist the action of time; and affording to physicians a compound of *free, permanent* hydrocyanic acid—a desideratum in medicine not hitherto obtained. Its formula has been published in this and other Medical Journals, and also submitted to some of the highest medical authorities in this country, among which are the Berkshire College of Medicine, Pittsfield, Mass.; Willoughby Medical College, Columbus, Ohio; Bowdoin Medical College, Brunswick, Me.; Vermont College of Medicine, Castleton, Vt.; Geneva Medical College, Geneva, N. Y., and also in manuscript to a large part of the medical faculty of the United States.

The attention of practitioners is respectfully solicited to this preparation, and it is confidently believed it will commend itself to their favor and confidence, having been found an invaluable remedy in treating the most obstinate as well as milder forms of pulmonary disease.

Prepared by JAMES C. AYER, Lowell, Mass. Sold by Druggists and Apothecaries generally in the Northern, Middle and Southern States, the British American Provinces, and in some of the Independent Republics of South America.

March 22—epit&eopf

CHLOROFORM! CAUTION!!

PHYSICIANS and Druggists are respectfully cautioned against purchasing Chloroform purporting to be manufactured by us, unless put up in bottles bearing our label and seal. We are induced to give this caution in consequence of the great quantity of impure chloroform in the market, the use of which is often attended with evil results. All the chloroform we make is chemically tested before being sold, and is warranted to be perfectly pure.

WM. B. LITTLE & CO.,

Chemists and Druggists, 104 Hanover street.

Prof. Simpson's Pamphlet on the use of Chloroform in Midwifery Practice, with an Appendix, containing remarks by Drs. Warren, Channing, Jackson and others, can be obtained as above. This Pamphlet contains more information on the use and properties of Chloroform than any work yet published.

March 22—t1

WM. B. LITTLE & CO.

J. P. MAYNARD'S LIQUID ADHESIVE PLASTER, OR COTTON SOLUTION.

A new and elegant substitute for Plaster Cloth, Sutures, Bandages, &c., in surgical operations. It is also much preferable to Court Plaster and Gold Beater's Skin, being nearly the color of the skin, adhering more closely to it, and continuing pliable and unaffected by washing.

This article, originally applied to Surgery by J. P. MAYNARD, has been found by all Surgeons who have tested it, far superior and more convenient than any former means of dressing Incised Wounds. For Burns, Sore Nipples, and all excoriated surfaces, it has proved extremely efficacious. It is not acted upon by water, and adheres with almost incredible tenacity to the skin, keeping the edges of the wound closely together, and causing it to heal with hardly a perceptible scar.

Prepared after the formula of J. P. Maynard, by MAYNARD & NOYES, and for sale by them at No. 11 Merchant's Row.

apr. 25

IMPROVED UTERO-ABDOMINAL SUPPORTERS.

THE subscriber would inform medical gentlemen that he continues to manufacture his *improved* "CHAPIN'S Abdominal Supporters," and they can be furnished with this instrument (which has been found so useful in cases of procidentia and prolapsus uteri, abdominal and dorsal weaknesses, as well as in cases of prolapsus ani, &c.), viz. from \$2.50 to \$6.00, according to quality. Perineum straps, necessary in some cases (extra), at 50 cts. to 75 cents. The measure of the patients to be taken around the pelvis in inches.

Reference may be had to the following physicians in Boston, among others, who have had practical knowledge of its utility:—Drs. John C. Warren, J. Randall, W. Channing, Geo. Hayward, J. Ware, E. Reynolds, Jr., J. Jeffries, J. V. C. Smith, W. Lewis, Jr., J. Homans, J. Mason Warren, &c.

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